

When Silence Said Everything: Reconceptualizing Trauma through Critical Disability Studies

by Angela Carter | Cripistemologies of Crisis: Emergent Knowledges for the Present, Issue 10.1 (Spring 2021)

ABSTRACT Reading X González's, March 24, 2018, "March For Our Lives" speech—their words and silences—as an entry point into what I term a crip theory of trauma, this essay argues that the dominant narratives about and around Post Traumatic Stress Disorder (PTSD) say more about the compulsivity of the "proper" citizen subject than they do the actual embodied experience and debilitation of trauma itself. The text reconceptualizes trauma narratives, like González's, through critical disability studies to argue that certain cripistemologies—or crip ways of knowing—trauma arise that are not otherwise available or readily accessible. Most notably, by rejecting dominant pathologizing forces and embracing crip ways of knowing, this analysis brings forth a new working definition of trauma, as an embodied, affective structure. These ways of knowing offer crucial insights for efforts to grapple with the ongoing forms of trauma enacted and perpetuated across the globe, and are particularly urgent against a political and cultural landscape that, as my reading of González's speech makes clear, in many ways refuses to hear, see, and learn from the knowledge that trauma produces.

KEYWORDS cripistemology, critical disability studies, trauma

I may feel that without some recognizability I cannot live. But I may also feel that the terms by which I am recognized make life unlivable. This is the juncture at which critique emerges, where critique is understood as an interrogation of the terms by which life is constrained in order to open up the possibility of different modes of living; in other words, not to celebrate difference as such but to establish more inclusive conditions for sheltering and maintaining life that resists models of assimilation. – Judith Butler¹

In a high-profile opinion piece for *TIME* magazine's "100 Most Influential People of 2018," President Barack Obama wrote that the survivor-activists of the mass shooting at Marjory Stoneman Douglas High School in Parkland, Florida had changed the gun debate in America.² There is a usual and predictable response to these tragedies, President Obama tells his readers. "We mourn. Offer thoughts and prayers. Speculate about the motives. And then...the political debate spirals into acrimony and paralysis."³ This time, though, something was different. This time, according to the president, the high school students who survived the mass shooting were changing this response pattern—and changing the terms of the debate—altogether.

President Obama is not alone in this assessment. Almost immediately after the shooting

on February 14, 2018 the media shifted focus away from the narrative trajectory President Obama so astutely described. The alternative narratives presented by the survivor-activists were now dominating news headlines and social media news feeds. On February 20, 2018, David Cullen of *Politico* wrote, "I've been covering mass shootings for decades. I've never seen a phenomenon like these students."⁴ On February 21, *The Washington Post* published a piece deliberating "Why the Parkland Kids Might Be Different."⁵ And on February 28, Michelle Cottle of *the Atlantic* contemplated, "How Parkland Students Changed the Gun Debate."⁶ Indeed, the organizing efforts and media savvy of the Parkland survivor-activists is to be commended. Through protests, marches, and commanding visits to both local and national politicians, the Parkland survivor-activists were refusing to allow the discourse to "spiral into acrimony and paralysis."⁷ Most notably, their ability to utilize media to their advantage, utilize social media to further their cause, and publicly outwit their political opponents, left even the most "jaded political and media types" impressed.⁸

However, in the analysis that follows, I argue that the Parkland survivor-activists are doing much more than changing "the gun debate," or disrupting our nation's tired response pattern to mass shootings or gun violence. I contend that, through their activism, the youth of Parkland are working to reconceptualize trauma—to create space for alternative understandings of trauma, writ large. This writing is part theory, part analysis, and part process; admittedly, it's a bit messy, but that's because trauma is messy and demands nothing less of us as scholar-educators. In Part One, I reconceptualize trauma through the overlapping frameworks of critical disability studies (CDS) and critical trauma studies (CTS). I maintain that we must redefine trauma from the theoretical junctures of these two interdisciplines if we are to *fully* attend to the embodied experiences, material realities, and sociopolitical causes and consequences of trauma. Part Two further extrapolates the theoretical underpinnings presented in Part One through a CDS analysis of X González's speech on March 24, 2018 at the Washington, DC "March for Our Lives" rally.⁹ Throughout their narrative-performance, González unapologetically presents the embodied affect of trauma.¹⁰ Moreover, their words and silences underscore what I call trauma's attributes of instability: time and space, subjectivity, and knowledge. As a result, González's narrative-performance critiques the social norms and stigmatizations that subdue traumatized bodyminds, and thus creates space for alternative understanding of trauma.¹¹ Lastly, in Part Three, I take up Alison Kafer's political/relational model of disability to theorize a germinal counterpart: a political/relational model of trauma.¹² Using both González's speech and the ongoing efforts of March For Our Lives, I contend that a political/relational model of trauma, as praxis for social justice and profound healing, will shift the dreadful, terrorizing realities of mass violence and collective suffering in the United States.

Trauma taught me not to cry. Not crying means surviving a world where narratives about your existence do nothing but negate your existence. But I cannot stop crying as I listen to X's speech. Their words are my words; their silences are my silences. I cannot stop the tears as they roll down my cheeks. "GO EMMA!" shouts some loud man. "Go EMMA! You can do it!" I immediately feel angry—so intensely angry. Why are you yelling?!? They know they can do it! They are doing it! Be quiet. Shut up and listen to them! It's as if no one in the crowd can just be with them. Just be what they need right now, what they are asking of you right now. No one knows how to hear them. You are too busy pushing your own narratives onto X. Stop! Listen! Just listen to them. They are saying it all. Everything. X is saying everything! You don't listen because they aren't speaking your

language. Theirs is a language of half sentences and silences, and you don't know how to hear it. "NEVER AGAIN! NEVER AGAIN! NEVER AGAIN!" you shout. Stop shouting! Stop talking! Listen! Listen to X! Listen to us! Listen to us. Listen to me.

X starts to cry, and I cry harder. Other people's narratives of me flood my mind: "You've overcome so much," "You're such an inspiration," "You never let your past define you," "It's such a miracle you didn't die," "If other people just worked as hard as you do . . ." X and their friends are bombarded with these narratives nationally, while learning to live with trauma in their bodyminds. I feel kinship. It feels like my heart is breaking. I keep crying. I cannot breathe. I cannot remember how to breathe. On the screen, X is inhaling deeply, like they too are trying to remember breath. Their face scrunches up just like mine and then I feel the room spinning and all I can think about are the people who can't breathe because of trauma . . . all the people, dead and alive, who can't breathe . . .¹³

Part One: Redefining Trauma

While its definition is highly debated, leading trauma theorist Cathy Caruth broadly describes trauma as "the response to an unexpected or overwhelming violent event or events that are not fully grasped as they occur, but return later in repeated flashbacks, nightmares, and other repetitive phenomena."¹⁴ The experiences of the Parkland survivor-activists may certainly meet this general definition. However, this mainstream understanding often produces a pathologization of trauma and limits our ability to attend to the nuances of personal trauma narratives, such as González's. To make space for and increase recognition of diverse experiences of trauma—of trauma's complex narratives, multiple narratives, counter-narratives, and even anti-narratives—we must redefine trauma altogether. Indeed, I am calling for a conceptual rescuing of trauma.¹⁵ If we are to ever break out of the ineffectual, cyclical patterns of political responses to events like the Parkland shooting, we must first uncouple trauma from pathology, and thus, from the clinical connotations that currently define and overshadow it within the US imaginary.

In the 1980s and 1990s, feminists raised questions about the hegemonic underpinnings of trauma's most dominant definitions. As Laura S. Brown succinctly notes, "trauma is thus that which disrupts these particular lives, but no other."¹⁶ When reflecting on the 1987 *Diagnostic and Statistical Manual of Mental Disorders* (DSM) criteria of post-traumatic stress disorder (PTSD) as including the person having "experienced an event that is outside the range of human experience," Brown notes that "the range of human experience becomes the range of what is normal and usual in the lives of men and the dominant class; white, young, able-bodied, educated, middle-class, Christian Men."¹⁷ While the phrase "outside the range of human experience" has since been removed from the DSM, Brown's reflection remains relevant. Trauma is typically, culturally recognized only when it disrupts particular lives—lives that should *not* be disrupted. When trauma disrupts "disposable" lives, few notice—or, if they do, they rarely stop to name the disruption "trauma."¹⁸

More recently, critical trauma theorists have moved even further away from generalizing frameworks.¹⁹ My work is in conversation with scholars like Monica Casper and Eric Wertheimer, who outline CTS as the study of "the ways that the category of 'trauma'

reveals and unsettles cultural classification systems."²⁰ This definition of trauma as a "category" converges, for me, with Sami Schalk's definition of "(dis)ability" as "the overarching social system of bodily and mental norms that include ability and disability."²¹ Like Schalk, I find it useful to differentiate between the social system of privilege/oppression and the corresponding individual experience. Relatedly, the work of Maurice E. Stevens and Ann Cvetkovich deeply informs my understanding of trauma. Stevens, in particular, writes that, "*trauma* is not simply a concept that describes particularly overwhelming events, nor is it simply a category that 'holds' people who have been undone by such events; but it is a cultural object whose function produces particular types of subjects, and predisposes specific affect flows that it then manages and ultimately shunts into political projects of various types."²²

In her work *An Archive of Feeling*, Cvetkovich goes further, soundly rejecting pathologizing approaches to trauma and aiming instead to "seize authority over trauma discourses from medical and clinical discourse in order to place it back in the hands of those who make cultures, as well as to forge new models for how affective life can serve as the foundation for public culture."²³ With this, Cvetkovich's work explores how the everyday artifacts of trauma produce an "affective experience that falls outside of institutionalized or stable forms of identity or politics," which reverberates along the same lines as Jina B. Kim's (and others) pivotal work developing a "crip-of-color" critique.²⁴

Disability studies, however, remains "remarkably silent" on matters of trauma, and trauma studies says little about disability or the social construction of "abnormality."²⁵ In his 2004 piece, "Trauma without Disability, Disability without Trauma: A Disciplinary Divide," James Berger argues that the fields have differing "premises, methods, and goals" and that there is no shared conceptual vocabulary.²⁶ Traditionally, disability studies has taken up the "important political and intellectual work" of "recast[ing] disability as something more than inherently traumatic."²⁷ Trauma studies, on the other hand, remains tied to psychoanalytic and clinical approaches of PTSD, and/or consumed with thinking through trauma as a metaphor.²⁸ Of course, disability scholars and activists are highly critical of turning embodied differences into metaphors, as this practice underpins ableist ideologies and structural violence.²⁹ In addition, disability studies arose out of a political movement and so scholars often write with a "spirit of advocacy," routinely employing personal narratives and claiming a disabled identity.³⁰ This is not the case with trauma studies. Theorists of trauma, particularly those concerned with its semiotics, rarely frame their work as political or locate themselves within their own theorizing.³¹ A study of trauma grounded in both CDS and CTS must develop more fully, because though not all instances of disability are traumatizing, many disabilities are produced by traumatic experiences (e.g., war, assaults, accidents). Moreover, disabled people are at least two times more likely than our non-disabled peers to experience violence and trauma because of our marginalized positions in society.³² Disabilities, particularly those occurring later in life, also often come with the kind of immense loss, grief, and mourning typically attributed to trauma.³³ And trauma itself can be debilitating and disabling.

While these ideas may seem theoretical in nature, I present them with the profound belief in the power of theory for healing.³⁴ Something dramatic shifted within me when I began to think/feel about my own traumas differently. When I began to understand trauma as a way of feeling, being, moving, and knowing the world, I no longer felt

pressured to "overcome" something that seemed to be a part of who I was. All of a sudden, I was able to find something like composure during my "breakdowns" because I started to think about myself as fluid, changing, flowing, rather than something solid that was broken and in need of fixing. I began to find a kind of calmness during my "flashbacks" because I began to imagine myself floating through space and time. These flashbacks were not something to forcefully interrupt but instead moments let play out with compassion. None of this came from therapy; it came from theory.

From the juncture of CDS and CTS, I've come to understand trauma as an embodied, affective structure that falls outside the hegemonic norms constituting social legibility—even as it is held deep within our bodyminds. This embodied, affective structure is specific, not to the horrendousness of an event or events, but rather to the debilitating sociopolitical responses and the overlapping attributes of instability that so often accompany it.³⁵ For some, this affect and its corresponding instabilities may be traceable to a single occurrence categorizable as "traumatic." For many, this affect and/or these instabilities arise from the uneven distribution of life chances and the unequal distribution of resources therein.³⁶

Let me provide three further clarifications.

First, I use the words "affective structure" with caution—I am not implying any sort of organization or arrangement (indeed, I consider "affective un-structure" a more accurate description). Rather, I am directly borrowing the terminology "affective structure" from affect theorists Gregory J. Seigworth and Melissa Gregg to denote "visceral forces beneath, alongside, or generally other than conscious knowing, vital forces insisting beyond emotion—that can serve to drive us toward movement, toward thought and extension, that can likewise suspend us (as if in neutral)—a barely registering accretion of force-relations, or that can leave us overwhelmed by the world's apparent intractability."³⁷ Trauma, I am arguing, is such a visceral force—a state of being and feeling that is "beyond emotion," and that lives deep within the bodymind.³⁸

Second, I argue that the current over-attention placed on the so-called traumatic "events of origin" is misguided and that definitions of trauma must be untethered from the "event(s)" that may initiate it. Focusing solely on the etiologies of trauma risks yielding a hierarchy of "what counts" as trauma and what events are "traumatic" enough. The embodied, affective structure of trauma may come from a catastrophic, "exceptional" event for some, or it might come from what Lauren Berlant calls "crisis ordinariness" for others.³⁹ Moreover, while any individual may experience hardship, crisis, and/or catastrophe, *trauma*, as I am positioning it here, is marked by an affective embodiment that disrupts the ability to perform the hegemonic standards of personhood. This shift moves away from a focus on the event(s) and centers the form of trauma on the experience or way-of-being. Trauma is an often-disabling phenomenological modality. For privileged individuals and populations, this embodied, affective structure of trauma may come and go, as they are more likely to have access to necessary resources for care. Indeed, PTSD, as a rubric for meaning making, was constructed with this temporary and normative framework in mind.⁴⁰ One must have access to (at least imagining) the "good life" pre-trauma in order to envision returning to the good life post-trauma.⁴¹ For disadvantaged individuals and populations, those who are denied equal access to resources and life chances, the embodied, affective structure of trauma often calcifies and can pass down through generations.⁴² The

ongoing ideologies of white supremacy, heterocispatriarchy, and racialized global capitalism mean that these latter experiences of trauma are rarely recognized as trauma, but rather coded in other racializing, gendering, pathologizing, and criminalizing ways. For example, it was not until George Floyd's murder that some white people began to recognize the systemic traumas Black Americans face at the hands of the police-state. Rather, these narratives of Black trauma have been and are still used to further pathologize, criminalize, and racialize Black people in the US. The causes of trauma do matter insofar as scholars and activists are concerned—which we should be—with working to alleviate structural inequities that leave particular people and populations more vulnerable than others. However, attention must be placed on systemic and structural inequities that consequently lead to higher vulnerabilities, rather than overemphasizing the events which are in fact the consequences not the origins.

Lastly, the critical approach to trauma presented here is fundamentally a crip approach, in that it seeks to take “a sledgehammer to—that which has been concretized” about trauma in the US imaginary.⁴³ Like queer theory, crip theory unsettles what we assume to be naturalized or known about the bodymind.⁴⁴ Canonized by Robert McRuer and Carrie Sandall, “cripping” as a verb and methodology “exposes the ways in which able-bodiedness and able-mindedness get naturalized and the ways that bodies, minds, and impairments that should be at the absolute center of a space or issue or discussion get purged from that space or issue or discussion.”⁴⁵ Utilizing crip theories, my critical approach to trauma seeks then to do the same and recenter traumatized bodyminds in the discussion. In his now canonical work *Crip Theory*, McRuer establishes crip theory (at least in part), by reframing disability through Butlerian terms. McRuer explains, “the theory of gender trouble might be signified in the context of queer/disability studies to highlight what we could call ‘ability-trouble,’—meaning not the so-called problem of disability but the inevitable impossibility, even as it is made compulsory, of an able-bodied identity.”⁴⁶ Just as queer theory serves as a critical interrogation of heteronormativity, crip theory aims to deconstruct the otherwise latent paradigms of ableism while showing the intrinsic interconnectedness of both as a system of oppression.⁴⁷ Extending McRuer's analysis, I suggest reconceptualizing trauma through crip theory in order to deconstruct and resist marginalizing notions of normative embodiment. If queer theory shows the culturally constructed, perpetual impossibility of gender, and crip theory shows the co-constitutive socially constructed, equally impossible notion of able-bodiedness/-mindedness—then a critical approach to trauma must show the cultural construction and inevitable impossibility of an embodied, continuous sense of bodymind stability. This is what I like to call trauma's “stability trouble.”⁴⁸

It is only through the assumption of a coherent and continuous sense of bodymind stability that another kind of embodiment could become understood as disrupted or traumatized. Thus, the normalized or un-traumatized bodymind is constituted precisely through the very process of marking the traumatized bodymind, as Other. It is this assumed and culturally valued continuous sense of bodymind stability that is problematically left as unquestioned in prevalent trauma theory. Those of us with trauma in our bodyminds become unrecognizable—we fall outside of social systems of recognizability—when we can no longer hide our experiences of instability. As an embodiment, an affect held deep within the bodymind, trauma so often destabilizes us. Trauma disrupts how we experience the world; how we move through the world; how we come to (un)(not)know the world; how we come to (un)(not)know ourselves and others.

This argument is not new. However, by situating trauma at the convergence of CDS and CTS, I seek to engage with these instabilities in an unconventional, crip way. If we can learn to create space, hold space, for what I've termed trauma's "attributes of instability," these interwoven epistemic, ontological, and temporal-spatial disruptions may bring with them pathways toward social change and collective healing, worthy of our attention.⁴⁹

Part Two: Trauma's Attributes of Instability

On March 24, 2018, ten days after the successful "National School Walkout," over eight hundred "March for Our Lives" rallies occurred simultaneously around the United States.⁵⁰ Broadcast live, the Washington, DC rally brought in hundreds of thousands of people and included performances by pop stars like Miley Cyrus and Demi Lovato. There were notable speeches by youth activists of color such as Naomi Wadler, Edna Chavez, and Dr. Martin Luther King Jr's granddaughter, Yolanda Renee King.⁵¹ Of course, remarks were given by many Parkland survivor-activists—including one of the key organizers and most prominent voices, survivor-activist X González.⁵² When it was their turn to speak, González walked with a commanding presence to center stage. Their head was tilted slightly upward; their face showed a solemn look. They tapped the podium with impatience and looked up for a moment scanning the crowd with that same impatience in their eyes. Then they smirked and showed the audience their combat boots. As a proud, outspoken, young bisexual person of Cuban decent, González has quickly become one face of a political landscape being built by and for queer youth of color.⁵³ At the same time, their shaved head and green jacket, adorned with countless pins and patches, signified a kind radicalism that made them not only a target of the Far Right, but unfortunately also that of many self-described mainstream Americans.⁵⁴

When they began, González started by noting the time it took for the Parkland shooter to enter the school, murder seventeen of their classmates, and leave the building without notice. Using anaphora, they continued, "No one understood..." "No one could believe..." "No one knew..." "No one could comprehend..." González proceeded to name every person who was murdered that afternoon. Then, for over four minutes, they stopped speaking entirely. Standing on the stage they stared directly forward, not at the crowd, but beyond it—creating an unnerving tension and holding their audience in it. They refused to break this tension even as the audience shouted, clapped, chanted, and tried to interrupt the visible distress they were witnessing. González's silence never broke. Their face clenched and they cried, as though each of the chants' repetitions was a repeated wound. Through their silence the cameras shuffled nervously back and forth between the crowd and González at nine times the rate of the spoken part of their narrative-performance. The silence and tension continued until González's timer beeped. With anger in their voice again, they announced the six minutes and twenty seconds since they came on stage—the exact time it took for the shooter to kill their classmates and leave undeterred. Without giving us any time to process, González immediately walked away with the same forceful demeanor that demanded our attention over six minutes ago.

My heart has been searching for a narrative like X's for longer than I can remember. The audience can't sit with their silences, their unfinished thoughts. But their silences said everything to me. I've never lived through a school shooting. X's trauma is not my own.

But our traumas are not so disconnected either. As a child I experienced gun violence in the context of domestic abuse during the first ten years of my life. I grew older and I grew into more traumas, as we so often do, including sexual violences and a disabling car accident—all of which compounded into my bodymind and into my selfhood. There is a paradox within trauma narratives. X knows this. Many presume that trauma cannot be spoken because the experience is so horrifying that it cannot be narrated. X and I know different. Trauma can be narrated. The problem is there are few discursive spaces that actually allow the speaker to be heard.

Once traumatized, the silences of trauma are immediately seized upon by discourse. One of three things might occur; they often occur at the same time:

- 1. You're ignored or dismissed. Your trauma is denied, downplayed, and/or rejected.*
- 2. You're pitied. You're in need of help. Therapy. Recovery. God. Healing. Your trauma is an opportunity for others to exercise compassion.*
- 3. You're a miracle, inspirational. You're here because God had other plans for you. You've overcome so much, a poster child. Your experience is turned into cliches.*

If you want your trauma to be acknowledged, you must talk about your experience through a particular, recognizable narrative.⁵⁵ These narrative frameworks trap us. They turn trauma into a commodity, easy for others to consume—a spectacle for audiences to take in without having to truly bear witness, hold space, or face their own belief systems. I've felt trapped in this narrative limbo for so long, lost in this unrecognizability, that I think I gave up trying to talk about my traumas. Then I heard X's silences and finally I could hear my own.

To the everyday viewer-listener, González's narrative-performance reflects their horrifying experience during the Parkland shooting. Their speech emphasizes trauma's unpredictability, its incomprehensibility, the tragedy of unfulfilled lives, and the unsettling memories that the survivor-activists now carry with them. For me, however, what González said and didn't say opens up alternative ways to think about trauma altogether. When González's narrative-performance is closely analyzed through CDS, three overlapping and nuanced attributes of trauma emerge: time and space, subjectivity, knowledges. Each is tethered to the others by trauma's most salient attribute, instability. González's speech brings forth an opportunity to reconsider the meanings we commonly make out of the instabilities of trauma and our collective response to each of these three overlapping attributes therein.

The first and most recurring attribute of trauma González's speech offers for reinterpretation is the significance of time and space. Within the Diagnostic and Statistical Manual of Mental Disorders (or DSM), the most commonly referenced experiences of time- and space-related trauma are flashbacks, nightmares, and triggers. Challenging the DSM's pathologizing logics, CDS scholars offer a radically different approach to thinking about such experiences within and through time and space. Margaret Price's recent work on "crip spacetime" begins by presenting the combined term, indicating what we intrinsically know—that the two are always already experienced as one.⁵⁶ For Price, "the spacetime we move through and which constitutes us is composed not only of geometric space and linear time, but also of the affective impact and intangible knowledges that manifest these radical inequities."⁵⁷ Price goes on to argue that even when we may be side by side, we do not inhabit the same spacetime

and these differences, “are often a matter of violent inequity, even of life or death.”⁵⁸ I extend Price’s theorization of crip spacetime, making room within it for what may be understood as trauma spacetime. Like Price, I am pulled to “crip” as a term of resistance. As a “radical form of disability politics,” both crip and crip theory challenge regulatory notions of bodymind normativity, while also questioning the construction of the normal/abnormal binary itself.⁵⁹ By situating trauma spacetime as a subset, relative of, and/or kind of crip spacetime, I follow other critical disability / crip theorists in “expand[ing] the possibilities of analysis in disability studies by moving away from more strictly medical, legal, and identity-based definitions of disability as an object of analysis.”⁶⁰ Like crip spacetime, trauma spacetime illuminates the normative assumptions and regulatory mechanisms placed upon bodyminds. The “violent inequities, affective impacts, and intangible knowledge” that Price notes of crip spacetime—they exist deeply within trauma spacetime as well. Every Parkland survivor-activist inhabits a different experience of trauma spacetime than their peers, teachers, parents, and community members. Perhaps it does not need to be said that they all inhabit a different experience of trauma spacetime than did their classmates who did not survive. Moreover, Black activists were quick to point out the unjust partiality that arises in response to activist movements because of the way our nation does and does not think about the connection between differing experiences of trauma spacetime and racism/white-supremacy culture. Charlene Carruthers responded to a tweet by Oprah that supported the Parkland survivor-activists with such an analysis, noting, “Gosh. This is amazing. And a I’m not being sarcastic. I have to be honest and say that I’m a bit taken aback (and a bit hurt) that those of us who were in the streets in the past five years for Black lives didn’t receive this type of reception or public support.”⁶¹ González too makes their particular experience as a young person of color known, but not by simply talking about trauma spacetime. González’s narrative-performance brings their audience into their trauma spacetime and doesn’t let go.

When González begins their performance, they immediately mark time by tapping the podium twice, setting their timer, then looking out beyond the audience with a wince that reads *I don’t have time for your welcoming cheers or chants*. When they speak, they begin with the concept of time. These words and actions come together to bring their audience into their experience of trauma spacetime: “Six minutes and about twenty seconds,” they say. “In a little over six minutes, seventeen of our friends were taken from us. Fifteen were injured.” This introduction emphasizes the significance of trauma’s spacetime and how much can happen within it. As González begins to pull us into their trauma spacetime, they share memories, feelings, images, and intensities that may or may not have adequate words to describe them—terms like nerve-ridden, fear, anger, and confusion. Yet, González continues to speak with calmness and urgency simultaneously. In doing so, they show how much normative time haunts those of us who are traumatized and how we must learn to navigate time in new, crip ways—all of which González returns to momentarily.⁶²

González’s voice starts low, but they pick up inflection as they continue. “And everyone,” they say, “absolutely *everyone* in the Douglas community was forever altered.” In this statement, with these words, González shifts and speaks to the second attribute of trauma within their speech. This attribute is ontological in nature and focuses on the immediate change in subjectivity for members of the Parkland community. As brief as González’s statement is, its importance cannot be understated. Trauma has changed, is changing, and may continue to change their very being, the very being of their

classmates, their teachers, and the adults around them. For González, trauma alters *everyone* in the community—not just the people at the school, the parents, or the loved ones, but “everyone” and “forever.” Here we see trauma creating a permanent and major alteration in the community. The word “forever” is worthy of note in that González is signifying this change as not only far-reaching and substantial, but also indefinite—not something to be “overcome.”

While some may dismiss González’s wording as nice turns of phrase or melodramatic political pleas, a closer analysis of their narrative-performance indicates that they are explicitly commenting on how trauma alters our very being *through* our ways of knowing. In their next statement, González continues explaining that the ontological shift brought on by trauma, this permanent change in their community, is directly related to the kind of knowledges they now hold. González explains, “Everyone who was there understands.” With more forcefulness in their voice, they broaden the scope of who is included in the community of knowers they are rhetorically creating: “Everyone who has been touched by the cold grip of gun violence understands.” With these words, González presents the third attribute of trauma for our consideration. They are establishing an epistemology of trauma, or more accurately, what Robert McRuer and Merri Lisa Johnson have termed a “cripistemology,” of trauma.⁶³ According to McRuer and Johnson, the term “cripistemology” draws attention to the politics of knowledge production by centering what we—as disabled people—know, how we know it, and why it matters.⁶⁴ Further developed in a coedited, two-part journal series, cripistemology merges the reclaimed word “crip” with epistemology in order to challenge the prominence of non-disabled ways of knowing through what Rosemarie Garland-Thomson conceptualizes as “sitpoint theory.”⁶⁵ With this, Johnson and McRuer push theorists not to resolve the assumed crisis between “identity-based or embodiment-based knowledge” and “poststructuralism, pleasure, or the slipperiness of meanings, texts, and bodies.”⁶⁶ Rather, they invoke cripistemology as a purposeful, conflicting theoretical trajectory—one that aligns with the instability of (dis)ability itself—and ask theorists to “proceed without fearing conceptual instability.”⁶⁷

While Johnson and McRuer do not use the language of trauma directly in these essays, they notably “[bind] cripistemology to *crisis*”—a word that often circulates around, in place of, or instead of trauma.⁶⁸ Johnson and McRuer explain that it is “in the interest of touching upon ways of being together that might be sustaining through crises” that they pulled together the editions on cripistemology in the first place.⁶⁹ Put another way, these two-part explorations into crip ways of knowing are connected to crisis with the intention of improving ways to move through it collectively.⁷⁰ The cripistemologies of trauma I see within González’s narrative-performance are just that—knowledges that may sustain us through crisis—if we come to see them as such. Further outlining their cripistemology of trauma, González goes on to explain that what they all understand is a kind of *not understanding*:

For us, long, tearful chaotic hours in the scorching afternoon sun were spent not knowing. No one understood the extent of what happened. No one could believe there were bodies in that building waiting to be identified for over a day. No one knew that the people who were missing had stopped breathing long before anyone of us had even known that a code red had been called. No could comprehend the devastating aftermath, or how far this would reach, or where this would go.

As Jack Halberstam explains in the virtual roundtable on cripistemologies, “any cripistemology worth its name should identify modes of not knowing, unknowing, and failure to know.”⁷¹ In the lines above, González does just that. These knowledges that trauma brought are ones of not knowing, unknowing, and failure to know. They are also knowledges that bind us together in/with unknowability. In the next line González says, “For those who still can’t comprehend, because they refuse to, I’ll tell you where it went. Right into the ground. Six feet deep.” Here González creates a political in-group/out-group between those who understand the embodied knowledges of trauma’s unknowability, and those who don’t understand the knowledges of trauma “because they refuse” to know. This refusal to know is a particular kind of epistemic injustice that Gaile Pohlhaus calls “willful hermeneutical ignorance.”⁷² As a kind of epistemology of ignorance, Pohlhaus frames willful hermeneutical ignorance as a nuanced dismissal and refusal of a marginalized person’s situated knowledge.⁷³ González and the other survivor-activists struggle to get mainstream America to (ac)know(ledge) their truths about the trauma of gun violence because, as Pohlhaus explains, for those exhibiting willful hermeneutic ignorance to do so would be to give up epistemic privilege and “investigate parts of the world in light of others’ concern.”⁷⁴ In other words, when those with social privileges are invested in keeping their privileges they can “maintain their ignorance by refusing to recognize” and by working to undermine any source of new knowledge presented by the marginalized voices.⁷⁵ This refusal to recognize marginalized knowledges, such as González’s narrative- performance, is not an inability, but “rather a willful act” of injustice.⁷⁶

Undeterred by these willful acts of refusal, González details a cripistemology of trauma as a paradoxical knowledge where “everyone understands” and “no one understood,” simultaneously. Trauma is a knowledge that “no one could comprehend” and yet “[they’ll] tell you” about it right now. Through this performative speech act González is not just calling on the Parkland community, they are creating a new community—interpellating, hailing in, all those who “have been touched by the cold grip of gun violence.” What’s more, they are calling in audience members to witness their trauma—perhaps to be rhetorically traumatized along with them. They are not presuming a given community, but rather building a new, expansive one, where anyone who can acknowledge the paradoxical truths of trauma that they are presenting is welcome. Some audience members can; some cannot. Some become “knowers” through witnessing their trauma and being with them in the unknowability; others still “refuse to know.” González is refusing to simplify the cripistemology of trauma. They are demanding the recognition of trauma with its complexities and its paradoxes; witnessing and refusal; isolation and community. As González presents it, trauma is something you can talk about, but as their next lines show, trauma is also where words fail.

At this moment in their narrative-performance González circles back to the first attribute of trauma, spacetime: “Six minutes and twenty seconds with an AR-15, and my friend Carmon will never complain to me about piano practice . . .” They begin crying:

Aaron Feis will never call Keira Miss Sunshine.

Alex Schachter will never walk into school with his brother Ryan.

Scott Beigel will never joke around with Cameron at camp.

Helena Ramsey will never hang around after school with Max.

Gina Montalto would never wave to her friend Liam at lunch.

Joaquan Oliver would never play basketball with Sam or Dylan.

Their words create images, scenes, even snapshots from the lives of their deceased classmates—only so they can remind us, as their trauma reminds them, that these moments will never happen again. Rhetorically, we're taken to the basketball court, camp, piano practice, and the lunchroom. These moments are indices within González's experience of trauma spacetime. These moments signify an unspoken, untraumatized "good life" that haunts them—something that once was and will never be again. González's voice speeds up as they continue.⁷⁷ There is a melancholy force behind each spoken name—a force, a particular kind of anger that ricochets between heavy-hearted agony and righteous indignation. They gasp for air between words and tears. Their trauma spacetime expands and contracts; they are both on stage and deep in memory at the same time. Those of us familiar with moving through trauma spacetime know this experience all too well. González continues, but now after each name, the sentence stays unfinished.

Aliana Petty would never...
Cara Luggin would never...
Chris Hixon would never...
Luke Hoyer would never...
Martin Duque Anquiano would never...
Peter Wang would never...
Alyssa Alhadeff would never...
Jamie Guttenberg would never...
Meadow Pollack would never...

Their voice gets higher and speeds up as they go along, almost as if they are overwhelmed. Some might wonder if they're on the verge of a panic attack. They aren't.. Or maybe they are. Who can know really? They live with the embodied affect of trauma within their bodymind. When they say the final name, their pace slows down and their tone drops slightly. While their agony is undeniable, González is not only publicly mourning their classmates. Their poignant memories, their lingering sentences, and the changing pace and tone of their voice, all come together to rhetorically suspend the lives of their classmates within the fluidity and complexity of trauma spacetime. Soon they will suspend their audience within their trauma spacetime too.

After naming their deceased classmates, González stops speaking entirely. They stand at the podium, for over four minutes, in complete silence.

González stares straight ahead, looking outward once more, beyond the audience. Their tears are gone, and their face is stern and stoic. We can hear them breathing again. Ellen Samuels writes that cript time "requires us to break in our bodies and minds to new rhythms, new patterns of thinking and feeling and moving through the world."⁷⁸ Trauma spacetime requires the same of us. With this silence, González does not ask—they require—their audience to sit with new rhythms and new patterns of thinking about trauma. Through silence, González demands that the audience attend to the trauma spacetime that they live within. Indeed, they bring the audience into it with them. The audience cannot handle it. Within seconds a man in the audience yells, "Go Emma!" Then others follow suit, chatting and clapping. After 30 more seconds of silence, audience members yell, "Go EMMA!" and "You can do it!" Two minutes pass then in unison they chant, "Never again! Never again! Never again!" González's eyes are closed now, almost as though they are trying to hide from the crowd. After a while the crowd

seems to realize this and stops chanting. The crowd is silent for just a moment, before someone says, "We're all with you Emma. We all love you."

Although present throughout their speech, González's embodied affect of trauma truly comes forward during these tense moments of silence. It is during these moments that the crowd does not know how to be with González's narrative-performance, and it is in this silence that they fall outside of social legibility (even if temporarily). The crowd insists González be a motivational speaker. As an audience, they seem to want or even need a call and response. Audiences demand a particular kind of trauma narrative, trauma performance, wherein trauma is presented as a devastating chaos that is ultimately overcome. González does not give their audience a narrative of overcoming or a narrative with a positive resolution. González gives the audience 6 minutes and 20 seconds of horror, devastation, chaos, and unknowing. González gives the audience something they do not know what to do with— silence, and trauma. Outside of the slight smile when showing their combat boots, González makes no effort to "connect" with the crowd. They do not joke, try to inspire, give a heartwarming plea, or ever smile again. They never talk of "overcoming" or "coming together," even politically. They are exasperated, heartbroken. They are mournful and indignant. They *are* sad—we can see their tears—but they do not tell you that. They do not use these words, but rather show you their anger at the community, country, and systems that failed them and their classmates. They end their narrative-performance with a snarky, almost annoyed look, telling their audience to "fight for your lives before it's someone else's job." In a tone ringing with near-resentment, González exclaims that if you don't join the fight against gun violence, it's *your* life that could be taken and then the burden will fall onto someone else. González's chooses the word "job," indicating that they do not see this organizing as their "life's passion" or their "meaning of life," but rather, as work—a "job"—something we have to have, but not something we love. Their trauma affect continues even after they finish speaking, as they walk off stage before the applause can be received. With González gone so quickly the camera focuses on a crying young white girl surrounded by the wider audience cheering wildly as though it were a rock concert. The camera turns again to show González sternly walking away. It's as if they have no interest, space, or time for the audience reception; the audience keeps cheering anyway.

I risk the vulnerability of naming my own traumas publicly, purposefully to break the unspoken code in academia wherein we pretend not to be fully human. In doing so, I also risk the performative wherein, despite the qualifiers, my narratives of trauma are read as authenticating me into a wounded subjecthood. This argument, a part of Yasmin Nair's well-circulated critique of trauma narrative⁷⁹ is sharp. It is sharp partly in that it astutely penetrates the ways that trauma narratives are usurped by neoliberalism for its own gain, and partly in that it cuts deep—it cuts out the potential for the cripistemologies of trauma, for disability justice as building blocks for collective and social transformation. I know that my attempts to resist the "poster child" and the inspirational story have meant that I've been interpellated into this ideal subject for neoliberalism. I have played these games for access to resources so that I could find a livable life in a bodymind rife with pain and suffering. I am not alone. I know that when I speak of my trauma knowledges, I further risk someone concluding that I am relying on a "wounded identity." (People have.) As though my claims for social justice could not stand on their own. (They do.) As though I would not be making them if I did not live with these traumas in my bodymind. (I would.) And still, my claims for social justice come not despite my disabling traumas but through them, and with them fully. And to deny that would be to deny my own

humanity. I agree completely with Nair that social justice movements and claims for social transformation should not and cannot need trauma to authenticate them. I also think feel deeply in the power of opening up the concept of trauma and its cripistemologies, because in doing so we move closer toward disability justice. We move toward new ways of being and knowing with one another that do not rely on "woundedness or injury" but rather on what disability activists have been telling us for so long about interdependence, wholeness, sustainability, accessibility, and anti-capitalist politics.⁸⁰

Part Three: Toward A Political/Relational Model of Trauma

González's speech is so powerful, in part, because it takes trauma out of the medical/clinical domain—outside of ways of viewing disability (and trauma) as an individual problem that needs to be overcome. For decades, the social model of disability has been the predominant theoretical approach to disability outside of the medical model and the medical industrial complex. Indeed, through its attention to inequalities within built environments and culturally-constructed rubrics for meaning making, the social model of disability has created pathways for significant political and cultural advances for disabled people. However, this model is not without its limitations and critique emerged early on.⁸¹ Among some of these limitations are the disputed binary created between "disability" and "impairment," and an inattentiveness to chronic pain and illness. In *Feminist Queer Crip*, Alison Kafer extends new life into this longstanding discussion regarding the social model of disability. Kafer addresses these concerns through the political/relational model of disability and in doing so presents a critical approach to *both* the medical model *and* the social model of disability. Rather than defining disability, Kafer positions disability as "contested and contestable," analyzing instead the creation of the category as it intersects with other markers of social difference.⁸² It is this embeddedness with vectors of power and oppression that concerns Kafer. Her "direct refusal of the widespread depoliticization of disability" reclaims disability as a sociopolitical site for activist responses and "collective reimagining."⁸³ I argue that in their narrative-performance, González is doing the same with trauma. Using Kafer's political/relational model of disability as a framework, I outline below the beginning tenets of a political/relational model of trauma. A political/relational model of trauma further extrapolates trauma from its dominant definitions so that it might become a site for collective reimagining. As its name suggests, a political/relational model of trauma also allows for expansive engagement/critique with the sociocultural, political, and relational aspects of trauma, including the pain and anguish that comes with trauma.

A Political/Relational Model of Trauma:

1. Trauma is socially constructed, even as it is held deep within our bodyminds. Here, I extend the CTS critique that trauma is not inherent to a catastrophic event but is determined by social consensus that the event was, in fact, traumatizing.⁸⁴ This collective decision-making is inevitably (bio)politicized and shaped by social systems of power/oppression. Furthermore, I argue that trauma remains socially constructed

even after it becomes held in our bodymind. What counts as trauma within the bodymind, when, by whom, in what ways, is also all determined by place, time, and culture. As with all disabilities, this too is highly (bio)politicized and shaped by social systems of power/oppression. Moreover, sociopolitical factors mediate access to competent trauma support, care, and resources.⁸⁵

González's narrative/performance itself may not show this directly, however the broader political discourse surrounding the Parkland survivor-activists absolutely does. The immediate and extraordinary praise the Parkland survivor-activists received for their organizing brought forward important critique surrounding questions of race and class, particularly in comparison to the organizing work of youth connected to Black Lives Matter.⁸⁶ The trauma of the mostly white, affluent Parkland youth is quickly recognized and rewarded, whereas the traumas of Black youth and other youth of color are routinely dismissed, ignored, or disregarded. To their credit, Parkland survivor-activists heard these critiques and dug deeper, reaching out to form coalitions across difference and further re(educate) themselves.⁸⁷ This coalitional work is evident in that well over half of the speakers at the DC rally, including González, were Black, Indigenous, and/or other people of color.⁸⁸ It's also worth noting that as early as the day of shooting itself, right-wing pundits and conspiracy theorists described the Parkland survivor-activists as "crisis actors," outright denying the students their trauma.⁸⁹ Not only does this quick dismissal allow for circumventing any discussion of gun violence, it also brings us back to Pohlhaus's "willful hermeneutical ignorance," allowing for refusal of a sociopolitical inconvenience.

2. The so-called "problem" of trauma cannot be solved through individualized medical/clinical intervention but must be addressed through broader social transformations. This is because the "problem" of trauma does not originate in the bodyminds of the individuals or populations who live with trauma, but rather in the social structures that unequally distribute life chances and resources toward a livable life. Trauma is more likely to reach those who are marginalized. The white supremacist, ableist, capitalist, and neocolonialist heterocispatriarchy traumatizes. Just as disability activists and scholars have long argued about disability, I am arguing about trauma: if we want to better the lives of traumatized people, we need to focus our efforts on changing the social structures and cultural ideologies surrounding trauma *and* its healing processes.

González's ending line, "Fight for your lives before it's someone else's job," urges us toward social change. The conclusion to their silence—this response to their experiences with trauma's attributes of instability—is not overcoming, recovery, and/or a call for healing. González calls for political action. The March for Our Lives organization founded by the Parkland survivor-activists continues this work in a number of ways. Most memorably are the infamous "price tags," which put a literal price on each student based on the amount of money the politicians in that state accept from the National Rifle Association.⁹⁰ With this and other tactics, including get-out-the-vote efforts, the March for Our Lives organization works to "harness the power of young people across the country to fight for sensible gun violence prevention policies that save lives."⁹¹ As their website exclaims, they are a one hundred percent youth-led "fight against all forms of gun violence" and are not "afraid to call B.S."⁹²

Let me be very clear: seeking support, care, and resources—including medical/clinical

services should not be shamed, dismissed, or rejected. Those of us who live with trauma in our bodyminds need access to care and the fault lines and slippages between care and cure are intricate and tortuous.⁹³ It is with profound gratitude that I credit disability activists, particularly disabled queer women of color, who have taught me to own care work as political work.⁹⁴ Just as Kafer “recognizes the possibility of simultaneously desiring to be cured of chronic pain and to be identified and allied with disabled people,” I, too, recognize the fundamental need to lessen the chronic anguish of the physical and psychological pain that comes with trauma.⁹⁵ However, when this individualized focus becomes the *only* mode of understanding trauma, we significantly limit our understanding of trauma and its impacts. This care work can and must go on while we simultaneously prioritize the fight for broader systemic change against traumatizing systems of violence.⁹⁶

3. Trauma is political. Trauma has been so deeply tethered to the medical/clinical and individualized model of disability that its political nature has been obscured. We must re-politicize trauma in every facet possible. I contend, building on Kafer’s political/relational model, that we need an “increased recognition for the political nature of a medical framing” of trauma in addition to a re-politicization of trauma writ large.⁹⁷ We must address tough questions regarding access to affordable, trauma-competent care and the politics of resources and life chances. Whose trauma will be considered worthy? Whose will be recognized? Whose will be dismissed? Whose bodyminds will carry intergenerational trauma and whose will not? Who will have life chances that mean they are less likely to experience sociocultural traumas like war, gun violence, sexual assault, domestic violence, hate crimes, and/or police violence? Who will not?

The entirety of González’s narrative-performance—indeed, the entire purpose of the eight hundred March for Our Lives rallies that day—is to resituate trauma as political. González and the Parkland survivor-activists demand that their trauma be deemed worthy—worth more than just empty political rhetoric. In addition to the line about fighting for your lives, González’s narrative-performance emphasizes the political when they directly state, “For those who still can’t comprehend, because they refuse to, I’ll tell you where it went. Right into the ground. Six feet deep.” In the literal sense the “it,” seemingly refers to their classmates. “It” is actually a floating signifier and as such may refer to any number of things González is articulating that this mass shooting took from them: who they once were as a community; the afternoon sunshine (now turned into “long, tearful, chaotic hours”); belief in a rescue / identification system; or the ability to comprehend their own experiences. The ferocity of their words, “six feet deep,” is followed shortly thereafter by a wrathful naming of the type of gun the shooter used, an AK-15. For González this is not informational, it’s political.

What’s more, González extends the demand for recognition to include anyone who lives with trauma related to gun violence. They exclaim that “everyone who has been touched by the cold grip of gun violence understands,” creating what Joan W. Scott calls a “collective affinity.” As Scott describes them, collective affinities are “play[ing] on identifications that have been attributed to individuals by their societies, and that have served to exclude them or subordinate them.”⁹⁸ Here, González’s narrative-performance draws upon the potentiality of trauma as a site for coalition building across differences. Trauma as collective affinity may include people who have experienced various kinds of gun violences, sexual violences, domestic or physical violences; people who live with

intergenerational and multigenerational traumas; people living with daily traumas of systemic oppressions; people who have experienced catastrophic accidents; veterans, civilians, and refugees of war; immigrants and asylums seekers; institutionalized and incarcerated peoples; unhoused people; people who have lived through climate disasters; and many others.

4. Finally, and relatedly, we must think of trauma in relational terms. Trauma does not happen in isolation. Trauma connects us. Trauma-inducing events happen to inter-connected populations as well as to individuals, and any caring and critical engagement with trauma itself requires that we relate, witness, acknowledge, and hold space for and with one another. Furthermore, the traumatized bodymind can only be known through its co-constitutive relationship to the normalized, untraumatized bodymind. Another way to say this is that trauma reminds us of our deep interconnectedness, our interdependence.

González's narrative-performance is overflowing with the understanding of trauma's relationality: by naming every single person who was taken from the Parkland community, and by naming the things they (un)(not)knows they will never do again. They also present the traumatized bodymind as co-constitutive with the untraumatized bodymind, when they talk about "everyone who was there" as (un)(not)knowing together and in relation to "those who still can't comprehend," who were presumably not there. Here they are defining trauma against the non-traumatized or those who have not experienced gun violence and therefore cannot fully understand. Lastly, as previously noted, González's speech acts as a calling-in of those who have experienced gun violence, interpellating a kind of trauma-bound community. In doing so, they situate trauma as relational and communal, resisting the medical model of disability that proclaims trauma to be an individual issue for individual concern. This move, of course, is cyclical—ushering trauma back into the political and allowing González to argue for collective action toward broader social transformation.

I think I've watched and rewatched X's speech four times now. I've stopped crying. I routinely tell people I go to more therapy than God. I have spent the greater part of the last decade searching for anything, something, anything, that would ease the physical pain, anguish, and fatigue I live with daily in my bodymind. I've tried all things on the disabled person bingo card.⁹⁹ Some help for a while; most don't. X's last words ring in my ears "fight for your lives . . . fight for your lives . . . fight for your lives . . ." I feelthink I am doing that every day. People say, "man I wish I could take a nap every afternoon!" I wish I didn't have to nap! Fighting for my life sometimes means "fighting" these moments of "well-meaning," ableist microaggression. It often means "fighting" my own internalized ableism. I rarely go to rallies, in-person, to hear the Xs of the world speak anymore. I rarely "take to the streets!" My disabled bodymind has taught that traditional forms of activism do not work for me. Disability and crip communities have taught me creativity and that this does not mean I am not a valuable activist.¹⁰⁰ I can care for my disabled bodymind, I can care for myself and provide care for others, and I can also engage in deep political social change. Indeed, there is no distinction.

Notes

1. Judith Butler, *Undoing Gender* (Oxfordshire: Routledge, 2004), 4. ↩

2. Barack Obama, "Cameron Kasky, Jaclyn Corin, David Hogg, Emma González and Alex Wind," *TIME*, April 19, 2018, time.com/collection-post/5217568/parkland-students. In May 2021, González clarified their pronouns and announced that they are now going by "X González." Please note that some of the sources referenced in this article do not reflect this information. Chris Perkins, "'Call Me X:' Survivor of Parkland shooting has picked out a new name," *SunSentinel*, May 11, 2021, <https://www.sun-sentinel.com/local/broward/parkland/florida-school-shooting/fl-ne-emma-gonzalez-now-x-gonzalez-20210511-knb4ao4qorczlcczvor5us2jdi-story.html> < <https://www.sun-sentinel.com/local/broward/parkland/florida-school-shooting/fl-ne-emma-gonzalez-now-x-gonzalez-20210511-knb4ao4qorczlcczvor5us2jdi-story.html>> . ↵
3. Obama, "Cameron Kasky." ↵
4. Dave Cullens, "Will the Parkland Kids Change the Gun Debate?," *POLITICO*, February 20, 2018, [politi.co/2EHHndy](https://doi.org/politi.co/2EHHndy) < <https://doi.org/politi.co/2EHHndy>> . ↵
5. Molly Roberts, "Why the Parkland Kids Might Be Different," *Washington Post*, February 20, 2018, www.washingtonpost.com/blogs/post-partisan/wp/2018/02/21/why-the-parkland-kids-might-be-different < <http://www.washingtonpost.com/blogs/post-partisan/wp/2018/02/21/why-the-parkland-kids-might-be-different/>> . ↵
6. Michelle Cottle, "How Parkland Students Changed the Gun Debate," *The Atlantic*, February 28, 2018, <http://www.theatlantic.com/politics/archive/2018/02/parkland-students-power/554399> < <http://www.theatlantic.com/politics/archive/2018/02/parkland-students-power/554399/>> . ↵
7. Cottle, "How Parkland Students"; see also Obama, "Cameron Kasky." ↵
8. Michelle Cottle, "How Parkland Students." ↵
9. My grounding in CDS is indebted to scholars such as Julie Avril Minich, who writes that disability studies "involves scrutinizing not bodily or mental impairments but the social norms that define particular attributes as impairments, as well as the social conditions that concentrate stigmatized attributes in particular populations." Julie Avril Minich, "Enabling Whom? Critical Disability Studies Now," *Emergent Critical Analytics for Alternative Humanities*, *Lateral* 5, no. 1 (2016), <https://doi.org/10.25158/L5.1.9> < <https://doi.org/10.25158/L5.1.9>> . ↵
10. X González, "Emma González's powerful March for our Lives speech in full," *Guardian News YOUTUBE*, March 24, 2018, <https://www.youtube.com/watch?v=u46HzTGVQhg> < <https://www.youtube.com/watch?v=u46HzTGVQhg>> ↵
11. I use the term "bodymind" following many of my mentors in disability studies and disability communities who refuse the pervasiveness of the Cartesian split and use the term to signify the inextricability of cognitive processes from those of the material body. See Margaret Price, "The Bodymind Program and the Possibilities of Pain," *Hypatia*, 30, no. 1 (Winter 2015): 268-84, <https://doi.org/10.1111/hypa.12127> < <https://doi.org/10.1111/hypa.12127>> . ↵
12. Alison Kafer, *Feminist Queer Crip* (Indiana University Press, 2013). ↵
13. I make this invocation to draw direct attention to the all too often deadly intersections between race and disability. See <https://www.blackdisabledandproud.org/black-lives-matter.html> < <https://www.blackdisabledandproud.org/black-lives-matter.html>> for further readings and resources. ↵
14. Cathy Caruth, *Unclaimed Experience: Trauma, Narrative, and History* (Baltimore: Johns Hopkins University Press, 2016), 91. ↵
15. To be clear, this call for a conceptual "rescuing" of trauma theory includes further addressing the inextricable ways in which whiteness and racialization are embedded within the hegemonic understandings of trauma and healing that have shaped our nation. See, for example, Dian Million, *Therapeutic Nations* (Tucson: The University of Arizona Press, 2014), and Resmaa Menakem, *My Grandmother's Hands: Racialized Trauma and the Pathway to Mending Our Hearts and Bodies* (Las Vegas: Central Recovery Press, 2017). ↵

16. Laura S. Brown, "Not Outside the Range: One Feminist Perspective on Psychic Trauma," *Trauma: Explorations in Memory*, ed. Cathy Caruth (Baltimore: Johns Hopkins University Press, 1995), 100–12. ↵
17. Brown, "Not Outside," 100. Feminist activist-scholars quickly rejected this definition in that "the range of human experience" was so narrowly, and hegemonically, defined. Furthermore, it by definition positioned anyone who experienced trauma as outside the range of the human. ↵
18. I understand the diagnosis of PTSD as nothing more than an institutionalized, and thus highly politicized, rubric that attempts to capture both the phenomena of trauma and its correlating affect/effect. Because there are numerous experiences and embodiments of trauma that fall outside of the parameters of this rubric, I do not see trauma and PTSD as synonymous. Rather PTSD is used to signify a certain kind of social, political, and medical recognition that is granted to some and denied to others. ↵
19. Monica J. Casper and Eric Wertheimer, "Within Trauma: An Introduction," *Critical Trauma Studies: Understanding Violence, Conflict and Memory in Everyday Life*, ed. Monica J. Casper and Eric Wertheimer (New York: New York University Press, 2016), 2. ↵
20. Casper and Wertheimer, "Within Trauma: An Introduction," 10. ↵
21. Sami Schalk, *Bodyminds Reimagined: (Dis)Ability, Race, and Gender in Black Women's Speculative Fiction* (Durham: Duke University Press, 2018) 6. ↵
22. Maurice E. Stevens, "Trauma is as Trauma Does: The Politics of Affect in Catastrophic Times," *Critical Trauma Studies: Understanding Violence, Conflict, and Memory in Everyday Life*, eds. Monica J. Casper and Eric Wertheimer (New York: New York University Press, 2016), 20. ↵
23. Ann Cvetkovich, *An Archive of Feelings: Trauma, Sexuality, and Lesbian Public Cultures* (Durham: Duke University Press Books, 2003), 20. ↵
24. Cvetkovich, *An Archive of Feelings*, 17. Also Jina B. Kim, "Toward a Crip-of-Color Critique: Thinking With Minich's 'Enabling Whom,'" *Emergent Critical Analytics for Alternative Humanities* < <https://csalateral.org/archive/forum/alt-humanities-forum/>>, *Lateral* 6, no. 1 (Spring 2017) < <https://csalateral.org/archive/issue/6-1/>>, <https://doi.org/10.25158/L6.1.14> < <https://doi.org/10.25158/L6.1.14>>. ↵
25. Daniel R. Morrison, and Monica J. Casper. "Intersections of Disability Studies and Critical Trauma Studies: A Provocation." *Disability Studies Quarterly* 32, no. 2 (2012), [doi:10.18061/dsq.v32i2.3189](https://doi.org/10.18061/dsq.v32i2.3189) < <https://dsq-sds.org/article/view/3189>>. ↵
26. James Berger, "Trauma Without Disability, Disability Without Trauma: A Disciplinary Divide," *JAC* 24, no. 3 (2004): 563. ↵
27. Morrison and Casper, "Intersections of Disability Studies and Critical Trauma Studies." ↵
28. James Berger, "Trauma Without Disability," 564–566. ↵
29. Douglas C. Baynton, "Disability and the Justification of Inequality in American History," in *The Disability Studies Reader*, ed. Lennard J. Davis, 5th ed. (Oxfordshire: Routledge, 2016), 33. ↵
30. Berger, "Trauma Without Disability," 571. ↵
31. Berger, "Trauma Without Disability," 571. ↵
32. According to the US Department of Justice Office for Victims of Crime, disabled people are more than twice as likely to experience violent crime than non-disabled people. We also know that so often violence goes unreported. See, for example, "Crimes Against People with Disabilities," National Crime Victims' Rights Week Resource Guide: Crime and Victimization Fact Sheets, *National Center for Victims of Crime*, 2018, https://ovc.ojp.gov/sites/g/files/xyckuh226/files/ncvrvw2018/info_flyers/fact_sheets/2018NCVRW_VictimsWithDisabilities_508_QC.pdf < https://ovc.ojp.gov/sites/g/files/xyckuh226/files/ncvrvw2018/info_flyers/fact_sheets/2018NCVRW_VictimsWithDisabilities_508_QC.pdf>. ↵

33. "Crimes Against People with Disabilities." ↵
34. See, bell hooks, *Teaching to Transgress: Education as the Practice of Freedom* (Oxfordshire: Routledge, 1994). ↵
35. I understand trauma as debilitating and dis-abling. The affects/effects of trauma on the bodymind can impact one's capacity to respond both physically and mentally as necessitated by late capitalism. Relatedly, the ableist structures and ideologies that permeate society can dis-able a traumatized individual or population by not recognizing their experience as valid or real, not providing resources to make life more livable, and/or further marginalizing them as "crazy" or "out of control." ↵
36. I borrow the phrase "uneven distribution of life chances" from queer legal scholar and theorist Dean Spade. See Dean Spade, *Normal Life: Administrative Violence, Critical Trans Politics and the Limits of the Law* (Durham: Duke University Press, 2015). ↵
37. Gregory J. Seigworth and Melissa Gregg, "An Inventory of Shimmers," in *The Affect Theory Reader*, ed. Mellisa Gregg and Gregory J. Seigworth (Durham: Duke University Press, 2010), 1. ↵
38. Many somatic bodyworkers agree with the depths to which trauma lives in the body. See, Peter A Levine, *Trauma and Memory: Brain and Body in a Search for the Living Past: A Practical Guide for Understanding and Working with Traumatic Memory* (Berkeley: North Atlantic Books, 2015). ↵
39. Lauren Berlant, *Cruel Optimism* (Durham: Duke University Press, 2011), 10. ↵
40. See, for example, the work of Allan Young, *The Harmony of Illusions: Inventing Post-Traumatic Stress Disorder* (Princeton: Princeton University Press 1995). ↵
41. In *Cruel Optimism*, Berlant theorizes "the good life" as "the political and affective economies of normativity" through "the fantasy of meritocracy, a fantasy of being deserving, and its relation to practices of intimacy, at home, at work, and in consumer worlds." It is "the production as desire of a collective will to imagine oneself as a solitary agent who can and must live the good life as promised by capitalist culture." Berlant, *Cruel Optimism*, 167. ↵
42. Women of Color, Black Feminists, Colonized Peoples, Indigenous Peoples, and Jewish People have been making this claim for a long time. For example, see, Avery F. Gordon, *Ghostly Matters: Haunting and the Sociological Imagination* (Minneapolis: University of Minnesota Press, 2008), and Joy DeGruy, *Post Traumatic Slave Syndrome: America's Legacy of Injury and Healing* (Portland: Joy Degruy Publications Inc., 2017). For scientific studies that show epigenetic evidence, see the work of Rachel Yehuda, Professor of Psychiatry and Neuroscience and Director of the Center for Psychedelic Psychotherapy and Trauma Research at the Icahn School of Medicine at Mount Sinai, <https://plu.mx/mtsinai/u/ryehuda>. ↵
43. Robert McRuer, *Crip Theory: Cultural Signs of Queerness and Disability* (New York: New York University Press, 2006), 35. ↵
44. With this, it can be helpful to consider crip theory as always queer, but queer theory as not always crip (in the same way that a square is always a rectangle, but a rectangle is not always a square). ↵
45. McRuer, *Crip Theory*, 23. ↵
46. McRuer, *Crip Theory*, 10. ↵
47. McRuer, *Crip Theory*, 2. ↵
48. This extension of McRuer/Butler is not merely intellectual. Trauma's instabilities can feel deeply troubling within the bodymind and can lead to various kinds of "trouble" in an

ableist/sanist world that refuses to recognize or care for trauma, as such. ↵

49. I am not interested in a romanticization of trauma or any of its attributes. The experiences and impacts of trauma can be horrifying. This includes its survival and what many now call "post-traumatic growth." Trauma is terrifying; it might also be illuminating and paradigm shifting. I am calling for an understanding of trauma in its full complexity. ↵
50. Ray Sanchez, "Student marchers call Washington's inaction on gun violence unacceptable," *CNN*, March 24, 2018, <https://www.cnn.com/2018/03/24/us/march-for-our-lives/index.html>. < <https://www.cnn.com/2018/03/24/us/march-for-our-lives/index.html>> . ↵
51. Times Staff, "Six of the most powerful young speakers at March for Our Lives," *LATimes.com*, March 24, 2018, <https://www.latimes.com/nation/la-na-march-speeches-20180324-story.html>. < <https://www.latimes.com/nation/la-na-march-speeches-20180324-story.html>> . ↵
52. Louis Lucero II, "What Emma González Said Without Words at the March for Lives Rally," *The New York Times*, March 24, 2018, <https://www.nytimes.com/2018/03/24/us/emma-gonzalez-march-for-our-lives.html> < <https://www.nytimes.com/2018/03/24/us/emma-gonzalez-march-for-our-lives.html>> . ↵
53. Ed Morales, "Emma González: La nueva cara of Florida Latinx," *Washington Post*, March 1, 2018, <https://www.washingtonpost.com/news/post-nation/wp/2018/03/01/emma-gonzalez-la-nueva-cara-of-florida-latinx/> < <https://www.washingtonpost.com/news/post-nation/wp/2018/03/01/emma-gonzalez-la-nueva-cara-of-florida-latinx/>> . ↵
54. Take for instance the Iowa Republican Representative, Steve King, who criticized González for wearing a patch of the Cuban flag. See Maegan Vazquez, "Steve King's Campaign Criticizes Parkland Survivor Emma Gonzalez," *CNN*, March 27, 2018, <https://www.cnn.com/2018/03/26/politics/steve-king-facebook-post-emma-gonzalez/index.html> < <https://www.cnn.com/2018/03/26/politics/steve-king-facebook-post-emma-gonzalez/index.html>> . ↵
55. At first, the media expects and even thrives on fetishizing "chaos" in personal narrative immediately after a catastrophic event. However, with time, these narratives are expected to shift into the conventional standard with a coherent beginning, middle, end; expected or debatable "plot" and resolution; character/personal development; and social justice, social good, and/or political implications. See, Arthur W. Frank, *The Wounded Storyteller: Body, Illness, and Ethics* (Chicago: University of Chicago Press, 1995). ↵
56. Margaret Price, "Moving Together: Toward a Theory of Crip Spacetime" (keynote lecture, Critical Disability Studies Collective Symposium, *Imagining Cultures of Access: Race, Disability and Mental Health on Campus*, University of Minnesota—Twin Cities, 2017), 10. See also Margaret Price, *Crip Spacetime: A Re-orientation to Disability Studies* (Durham: Duke University Press, Forthcoming). ↵
57. Price, "Moving Together," 10. ↵
58. Price, "Moving Together," 10. ↵
59. Price, "Moving Together," 3. ↵
60. Sami Schalk, "Critical Disability Studies as Methodology," *Emergent Critical Analytics for Alternative Humanities*, *Lateral* 6, no. 1 (Spring 2017), <https://doi.org/10.25158/L6.1.13> < <https://doi.org/10.25158/L6.1.13>> . ↵
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64. Johnson and McRuer, "Cripistemologies," 128–130. ↵
65. Garland-Thomson discusses "sitpoint theory" in reference to Nancy Mair's writing in *Waist High in the World* (1996). Quoted in Johnson and McRuer, "Cripistemologies," 134. ↵
66. Johnson and McRuer, "Cripistemologies," 132. ↵
67. Johnson and McRuer, "Cripistemologies," 132. ↵
68. Merri Lisa Johnson and Robert McRuer, "Introduction: Cripistemologies and the Masturbating Girl," *Journal of Literary & Cultural Disability Studies*, 8, no. 3 (2014): 254. <https://muse.jhu.edu/article/558366/pdf> < <https://muse.jhu.edu/article/558366/pdf>> . ↵
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99. A quick Google search for "Chronic Illness Bingo" or "Spoonie Bingo" will bring up many examples, like <https://myheartsisters.org/2014/11/23/chronic-illness-bingo/> < <https://myheartsisters.org/2014/11/23/chronic-illness-bingo/>> . Relatedly, also search "Ableism Bingo." ↩
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Author Information

Angela Carter

As a Ronald E. McNair scholar, Angela M. Carter became the first person in her family to graduate from college when she earned a BA in English, with honors, from Truman State University in 2009. In 2015, Angela earned a Master's Degree from the University of Minnesota in Feminist Studies. In 2019, she completed her PhD in Feminist Studies from the University of Minnesota (UMN). Broadly speaking, Angela's academic interests include: trauma studies, critical disability studies, social justice pedagogies, feminist epistemology, and queer/crip theory. Angela's work at the intersections of trauma and disability has previously appeared in *Disability Studies Quarterly*. She also co-authored a chapter on navigating structural ableism in graduate school which appears in the anthology *Negotiating Disability: Disclosure and Higher Education*, published in 2017 by the University of Michigan Press. Since completing her PhD, Angela has worked as an Access Consultant at the Disability Resource Center at UMN. She has also continued in her role as a co-founding member of the UMN Critical Disability Studies Collective, an organization working to foster an academic community around critical disability studies throughout the Minnesota university system.

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Article details

Angela M. Carter, "When Silence Said Everything: Reconceptualizing Trauma through Critical Disability Studies," *Lateral* 10.1 (2021).

<https://doi.org/10.25158/L10.1.8>

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ISSN 2469-4053